



Credit Card Payment

Client Name:		
Type of Card:		
16 Digit Card Number:		
Start Date:		
Expiry Date:		
Name on Card:		
Security Code (last 3 digits on back of card):		
Address & Postcode (where card is registered):		
Type of Card Payment	(please v)	Charges
Mastercard / Visa (Personal)		1.95%
Mastercard / Visa (Corporate/Business)		2.45%
Solo / Maestro / Switch		26p
Office Use Only		
Completed by:		
Date:		
Amount to Pay:		